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Bib Data Sheet

CONFIRMATION NO. 4612

SERIAL NUMBER 10/067,346	FILING DATE 02/07/2002 RULE	CLASS 848 375	GROUP ART UNIT 2613	ATTORNEY DOCKET NO. 111915	
APPLICANTS Akinari Todoroki, Hachioji-shi, JAPAN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 2001-046094 02/22/2001 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/01/2002					
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and <i>Matthew Hong</i> <i>MSH</i> Acknowledged Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 10	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 1
ADDRESS 25944					
TITLE Image signal decoding apparatus					
FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



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CONFIRMATION NO. 4612

SERIAL NUMBER 10/067,346	FILING DATE 02/07/2002 RULE	CLASS 348	GROUP ART UNIT 2613	ATTORNEY DOCKET NO. 111915	
APPLICANTS Akinari Todoroki, Hachioji-shi, JAPAN; ** CONTINUING DATA ***** ** FOREIGN APPLICATIONS ***** JAPAN 2001-046094 02/22/2001 IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 03/01/2002					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		STATE OR COUNTRY JAPAN	SHEETS DRAWING 10	TOTAL CLAIMS 13	INDEPENDENT CLAIMS 1
ADDRESS 25944					
TITLE Image signal decoding apparatus					
FILING FEE RECEIVED 740	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		